

Application Serial No. 10/049,949
Amendment dated July 26, 2005
Reply to Office Action dated April 26, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/049,949 Confirmation No. 2546
Applicant : Hildegard Romer et al
Filed : April 22, 2002
Title : METHOD AND DEVICE FOR
PRODUCING COLOURED GLASSES
TC/A.U. : 1731
Examiner : Eric J. Hug

Atty. Docket No. : WEI0033
Customer No. : 0832

AMENDMENT AFTER FINAL ACTION

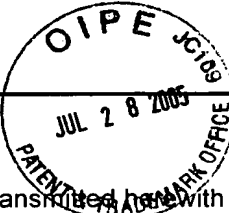
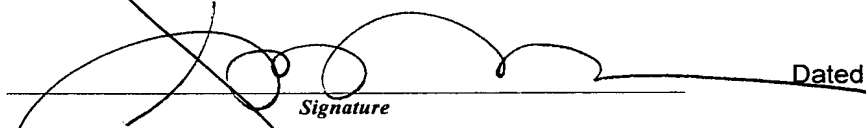

MAIL STOP RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of April 26, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. WEI0033	
Applicant(s): Hildegard Romer et al						
Application No. 10/049,949	Filing Date April 22, 2002	Examiner Eric J. Hug	Customer No. 0832	Group Art Unit 1731	Confirmation No. 2546	
Invention: METHOD AND DEVICE FOR PRODUCING COLOURED GLASSES						
 COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	3 =	1	x \$200.00	\$200.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$200.00	
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of \$200.00 to cover the filing fee is enclosed. <i>(Check # 118587- \$990.00)</i> <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 02-0385 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: July 26, 2005			
John F. Hoffman, Regis. No. 26,280 Baker & Daniels 111 East Wayne Street, Suite 800 Fort Wayne, IN 46802 Telephone: 260-424-8000 Facsimile: 260-460-1700			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on July 26, 2005 _____ (Date)  _____ Signature of Person Mailing Correspondence July 26, 2005 _____ Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						